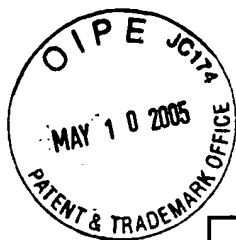


*Handwritten signature/initials*

| <b>AMENDMENT TRANSMITTAL LETTER</b>   |   |   |                                   | Docket No.<br>2929-0260P                                    |        |
|---|---|---|-----------------------------------|---|--------|
| Application No.<br>10/813,706-Conf. #8907   | Filing Date<br>March 31, 2004             | Examiner<br>G. K. Verbitsky             | Art Unit<br>2859                  |   |        |
| Applicant(s): Peter ANDERSON et al.   |   |   |                                   |   |        |
| Invention: SENSOR ARRANGEMENT HAVING AN AIR INFLOW PATTERN FOR PREVENTING DIRECT DEBRIS IMPACT  |   |   |                                   |   |        |
| <b>MS Amendment</b><br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450   |   |   |                                   |   |        |
| Transmitted herewith is an amendment in the above-identified application.<br>The fee has been calculated and is transmitted as shown below.   |   |   |                                   |   |        |
| <b>CLAIMS AS AMENDED</b>  |   |   |                                   |   |        |
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate  |        |
| <b>Total Claims</b>   | 24  | - 20 =                                  | 4                                 | x 50.00   | 200.00 |
| <b>Independent<br/>Claims</b>   | 6   | - 3 =                                   | 3                                 | x 200.00  | 600.00 |
| <b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>   |   |   |                                   |   |        |
| <b>Other fee (please specify):</b>  |   |   |                                   |   |        |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>   |   |   |                                   |   | 800.00 |
| <input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>   |   |   |                                   |   |        |
| <input type="checkbox"/> No additional fee is required for this amendment.  |   |   |                                   |   |        |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br>A duplicate copy of this sheet is enclosed.  |   |   |                                   |   |        |
| <input checked="" type="checkbox"/> Two (2) checks in the amount of \$400 each <span style="margin-left: 20px;">800.00</span> to cover the filing fee is enclosed.  |   |   |                                   |   |        |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |   |   |                                   |   |        |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <span style="margin-left: 20px;">02-2448</span><br>as described below. A duplicate copy of this sheet is enclosed. |   |   |                                   |   |        |
| <input checked="" type="checkbox"/> Credit any overpayment.   |   |   |                                   |   |        |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  |   |   |                                   |   |        |
| <br>D. Richard Anderson<br>Attorney Reg. No.: 40,439  |   |   |                                   | Dated: <span style="margin-left: 20px;">May 10, 2005</span> |        |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP<br>8110 Gatehouse Rd<br>Suite 100 East<br>P.O. Box 747<br>Falls Church, Virginia 22040-0747<br>(703) 205-8035  |   |   |                                   |   |        |



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |                    |                          |                        |
|---|--------------------|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |                    | <b>Complete if Known</b> |                        |
|   |                    | Application Number       | 10/813,706-Conf. #8907 |
|   |                    | Filing Date              | March 31, 2004         |
|   |                    | First Named Inventor     | Peter ANDERSON         |
|   |                    | Examiner Name            | G. K. Verbitsky        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  | Art Unit           | 2859                     |                        |
| <b>TOTAL AMOUNT OF PAYMENT</b>  | <b>(\$)</b> 600.00 | Attorney Docket No.      | 2929-0260P             |

**METHOD OF PAYMENT** (check all that apply)

|  |                                      |  |                               |   |
|--|--------------------------------------|--|-------------------------------|---|
| <input checked="" type="checkbox"/> Check  | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order   | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u> |                                      |  |                               |   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |                                      |  |                               |   |
| <input type="checkbox"/> Charge fee(s) indicated below   |                                      | <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b> |                               |   |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17                                    |                                      | <input checked="" type="checkbox"/> Credit any overpayments                              |                               |   |

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                                 | SEARCH FEES |                                 | EXAMINATION FEES |                                 | Fees Paid (\$) |
|------------------|-------------|---------------------------------|-------------|---------------------------------|------------------|---------------------------------|----------------|
|                  | Fee (\$)    | <u>Small Entity</u><br>Fee (\$) | Fee (\$)    | <u>Small Entity</u><br>Fee (\$) | Fee (\$)         | <u>Small Entity</u><br>Fee (\$) |                |
| Utility          | 300         | 150                             | 500         | 250                             | 200              | 100                             |                |
| Design           | 200         | 100                             | 100         | 50                              | 130              | 65                              |                |
| Plant            | 200         | 100                             | 300         | 150                             | 160              | 80                              |                |
| Reissue          | 300         | 150                             | 500         | 250                             | 600              | 300                             |                |
| Provisional      | 200         | 100                             | 0           | 0                               | 0                | 0                               |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | <u>Small Entity</u><br>Fee (\$) |
|--|----------|---------------------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                              |
| Each independent claim over 3 (including Reissues) | 200      | 100                             |
| Multiple dependent claims                          | 360      | 180                             |

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|
| 24                  | - 20 = 4            | x 50.00 =       | 200.00               |

| <u>Multiple Dependent Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------------------|-----------------|----------------------|
|                                  |                 |                      |

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|
| 6                    | - 3 = 3             | x 600.00 =      | 600.00               |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u>                | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|--------------------------------|----------------------|
|                     | - 100 =             | /50   | (round up to a whole number) x |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

|                     |                     |                  |        |           |                |
|---------------------|---------------------|------------------|--------|-----------|----------------|
| <b>SUBMITTED BY</b> |                     | Registration No. | 40,439 | Telephone | (703) 205-8035 |
| Signature           |                     | (Attorney/Agent) |        |           |                |
| Name (Print/Type)   | D. Richard Anderson |                  |        | Date      | May 10, 2005   |



MS AMENDMENT  
Docket No.: 2929-0260P  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Peter ANDERSON et al.

Application No.: 10/813,706

Confirmation No.: 8907

Filed: March 31, 2004

Art Unit: 2859

For: SENSOR ARRANGEMENT HAVING AN  
AIR INFLOW PATTERN FOR  
PREVENTING DIRECT DEBRIS IMPACT

Examiner: G. K. Verbitsky

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

05/11/2005 SZEWDIE1 00000086 10813706

01 FC:1201  
02 FC:1202

600.00 0P  
200.00 0P

Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated February 23, 2005, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.